

02/13/2015

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Updates from the MT  
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Bureau

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## First, a safety tidbit...

### Eye wash operation

Use the emergency eye wash immediately if your eyes are exposed to a hazardous chemical.

The first few seconds after exposure to a hazardous chemical (especially a corrosive chemical) are critical. Delaying treatment, even for a few seconds, may result in irreparable eye damage. Don't hesitate!

### **To use emergency eye wash:**

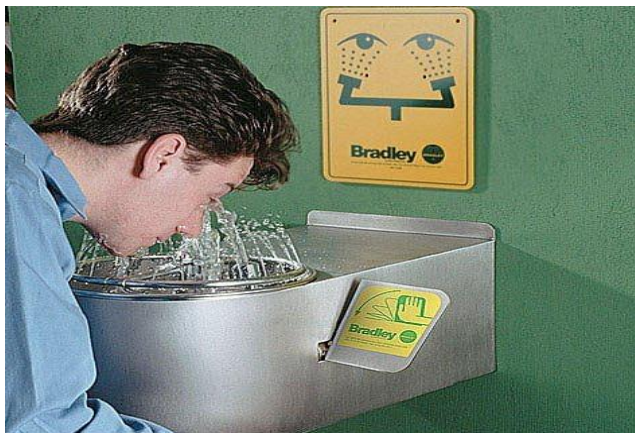
**Immediately flush eyes** for at least 15 minutes.

**Keep the eyes open and rotate the eyeballs in all directions** to remove contamination from around the eyes. An injured person may need help holding the eyelids open.

**Call Poison Control Center** at (800) 222-1222 for advice, then seek medical attention immediately.

Have someone bring or fax the [Safety Data Sheet](#) (formerly called *Material Safety Data Sheet*) for the chemical to the doctor.

### **Report the injury or exposure.**



## Sentinel Laboratory Survey

Soon, MTPHL will be emailing out a Sentinel Laboratory Survey to all the clinical laboratories in Montana. The purpose of the survey is to gather updated contact information and laboratory capabilities and to assess sentinel laboratory status. A goal for 2015 is to increase the number of sentinel laboratories within our state and to provide aid in writing select agent policies and procedures to those laboratories that are sentinel laboratory eligible. The link to the survey, conducted in Survey Monkey, will be provided in an email. Please help by taking a few moments to complete the survey.

## ♥♥♥♥♥♥♥♥♥♥♥♥♥♥♥♥ Watch for GREEN ♥♥♥♥♥♥♥♥♥♥♥♥♥♥♥♥

When opening reports that are web delivered, the presence of green verbiage indicates that there is additional information in this field. This is commonly seen in the "Comment" tab at the top of the report where the submitter ID can be found. It can also show up on the report itself in the top right hand corner as a "Link". Clicking on this Link will reveal attached information such as reference laboratory reports, and scans of unsatisfactory blood spots for newborn screening reports.

## A reminder of all the ways of ordering your MTPHL supplies...

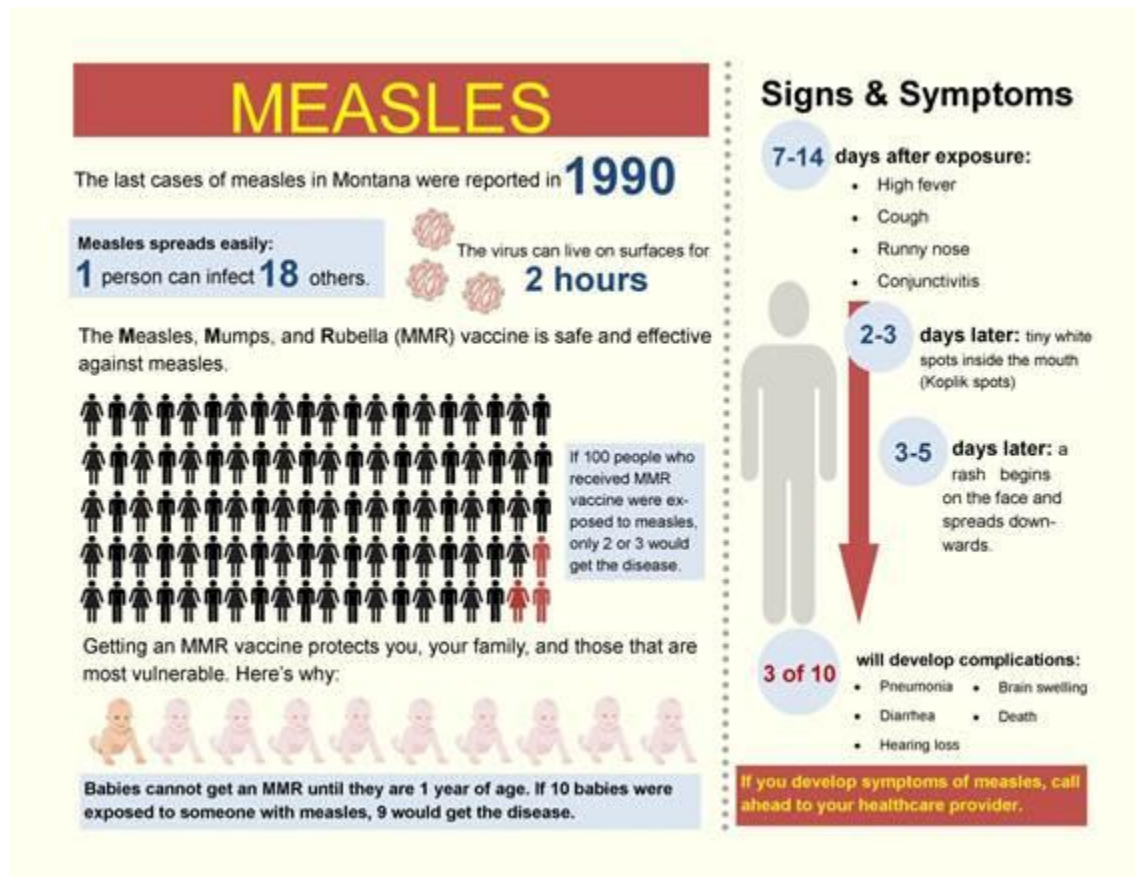


- ✓ Call us at 800-821-7284 or 444-3444
- ✓ Fax your [Supply Order form](#) to 444-1802
- ✓ Email us at [mtphl@mt.gov](mailto:mtphl@mt.gov)
- ✓ Enclose the [Supply Order form](#) with your next shipment of specimens

## Montana Communicable Disease Weekly Update

Release date: 2/13/2015

**Infographic of the Week:** Measles is a hot topic; 121 cases of measles have been reported in the United States since the beginning of 2015. Here is some information about the disease, including Montana statistics. Please review the Measles topic below.



For more information, please visit the [DPHHS Measles](#) and [CDC Measles](#) websites.

### DISEASE INFORMATION

**Summary – MMWR Week 5 - Ending 2/7/15** Preliminary disease reports received at DPHHS for the reporting period February 1–7, 2015 included the following:

- **Vaccine Preventable Diseases:** Influenza hospitalization (27), Pertussis (9), Varicella (3)
- **Invasive Diseases:** *Streptococcus pneumoniae* (2)
- **Enteric Diseases:** Campylobacter (1), Listeriosis (1), Salmonellosis (2), Shiga-toxin producing *E. coli* [STEC] (1)
- **STD/HIV:** Chlamydia (76), Gonorrhea (15), Syphilis (0), HIV\* (0)
- **Hepatitis:** Hepatitis C, chronic (21)
- **Vector-borne Diseases** (0)
- **Travel Related Conditions:** (0)
- **Animal Rabies:** (0)
- **Elevated blood lead:** (3)

\* A case is included if a new confirmatory test or report was received by DPHHS. Cases include both persons who were newly diagnosed and persons newly reported in Montana who may have been diagnosed in another state or country.

NOTE: The attached reports have multiple pages reflecting the following information: (1) cases for the past reporting week; (2) communicable diseases YTD; (3) clusters and outbreaks; and (4) a quarterly HIV/STD summary.

## **HOT TOPICS**

### **Measles:**

- ***Please communicate with your key surveillance partners on the need to immediately report suspect cases of measles to you as local health departments.***

We have received specimens at our laboratory where we were unaware they were coming, as was the local health jurisdiction. There appear to be two primary mechanisms at local levels where public health could hear about a suspected case before a specimen shows up at our laboratory. The provider/facility level and the facility laboratories could each report. Every public setting a suspect case is in has the potential for exponential exposure as is noted in this week's infographic.

- ***Please review the attached Chapter 7 of the CDC Surveillance of Vaccine Preventable Diseases Manual.*** You can also access it at <http://www.cdc.gov/vaccines/pubs/surv-manual/chpt07-measles.pdf>. This resource will answer most questions you and providers might have regarding Measles.

There may also be some confusion regarding what constitutes an exposure and you have an opportunity to educate providers. Many are unaware that public health has concerns even in the hours after a person has left a public area. This is something most providers have never dealt with and the scope of the threat is often not fully appreciated. The manual is an excellent reference.

- Please get the information in the January 26<sup>th</sup> Measles Health Alert Network message out. WE all want to thank providers for their increased awareness as reflected by increasing testing, but surprises like a measles specimen coming into the state laboratory and no one knows is coming should send a shudder through all of us. There is only 72 hours after exposure to be able to perform any prophylaxis. That HAN can be located at <http://emergency.cdc.gov/han/han00376.asp>
- Also, speak to your labs about sending measles specimens to the Montana Public Health Laboratory. MTPHL turnaround time will be as fast as possible along with very quick resulting. ***CDEpi will assist with paying for suspect measles specimens submitted. Contact us to coordinate submissions.***

As the Health Alert Message states... "Immediately report patients "suspected" of having measles to your local health department.

- The Montana Public Health Laboratory (MTPHL), 800-821-7284 (24/7), has the ability to conduct testing for measles using PCR, viral culture and serologic testing."
- Contact your local health department or the Montana Immunization Section (444-5580) if you have concerns or questions regarding individual patient immunization status. Records may be available to assist you.

That HAN message can be located at <http://dphhs.mt.gov/Portals/85/publichealth/documents/HAN/2015/HANAD2015-2.pdf>

**Norovirus:** Technical guidance for norovirus outbreaks: New guidance documents are available on SharePoint under technical guidance à norovirus à Guidance documents. Outbreak management tools include recommendations and control for various settings including healthcare, school, general etc.. Please feel free to use those as a guide or handout to facilities experiencing an acute gastroenteritis outbreak.

**Tuberculosis:** The [2014 Montana Tuberculosis Annual Summary](#) is now available on the DPHHS TB Program website. In addition, communicable disease history buffs may want to watch an upcoming PBS American Experience film, *The Forgotten Plague*, which highlights the battle against TB in America. The show will air Tuesday, February 10<sup>th</sup>. Follow this link to view a preview and to obtain local viewing information: <http://video.pbs.org/video/2365409222/>.

**Current Influenza Activity:** Influenza activity continues to be quite high with another 313 cases reported across Montana during the week of February 1-7. This is approximately half of last week but still high. Season to date, 4652 cases as well as 463 hospitalizations have been reported to DPHHS along with 14 deaths. In context, Montana had 318 hospitalizations reported for the whole last season (2013/2014). Please look over the CDC information linked below and the most recent [Montana Influenza Summary](#)

It is still not too late to be vaccinated! CDC notes, “[Flu activity](#) is high across most of the country with flu illnesses, hospitalizations and deaths elevated. Flu season will probably continue for several weeks. While the [flu vaccine](#) is not working as well as usual against some H3N2 viruses, vaccination can still protect some people and reduce hospitalizations and deaths, and will protect against other flu viruses. [Influenza antiviral drugs](#) can treat flu illness. CDC recommends these drugs be used to treat people who are very sick or who are at [high risk of serious flu complications](#) who have flu symptoms. Early antiviral treatment works best.”

CDC’s weekly key points document is attached and National influenza information including activity reports can be found at <http://www.cdc.gov/flu/weekly/>

**Respiratory Syncytial Virus (RSV)- Continued Increase in Percent of Positives:** The 2014–15 RSV season officially began the week ending December 20, 2014. RSV season onset is determined as the first of two consecutive weeks when the positivity rate of RSV testing is  $\geq 10\%$ . All regions in Montana are at seasonal activity at this time. Weekly updates and additional RSV and RSV prophylaxis information can be found at <http://dphhs.mt.gov/publichealth/cdepi/diseases/rsv.aspx>.

## **INFORMATION/ANNOUNCEMENTS**

**STD Reporting reminder:** *LHDs please be sure to submit all outstanding 2014 STD case reports by 2/28/15, so the STD Program can close out records and submit final 2014 STD data to CDC.*

**New outbreak reporting form:** Thank you all for your dedicated hard work in reporting outbreaks to us. Outbreaks are reported with complete elements in unprecedented quantities. We just wanted to express our sincere appreciation to you for submitting these forms as complete as they are. We have already taken action on limitations that were addressed in these forms and tremendously improved record keeping for outbreaks in Montana. THANK YOU!

[Influenza Hospitalization reporting: High numbers of hospitalizations continue to be reported with another 77 cases in the last week!](#) Please continue to report hospitalizations due to influenza. Please provide the following information in



the investigation comments: type of influenza diagnosed, current seasonal influenza vaccine status, and any comorbidities present at diagnosis. We have received several reports with 'unknown' immunization status. In order to present the most accurate picture of the influenza burden in the state, we need our cases to be as complete as possible. Please try to obtain this information when you are reaching out to your providers/hospitals/IPs. Remind them to collect this information for you to avoid repeated call-backs.

### **Isolation and Quarantine Training for Rural Communities (Western Version):**

Sue Hansen in Beaverhead County has confirmed an Isolation and Quarantine Training in Dillon on March 11. As registration information becomes available, it will be provided. The courses are:

- MGT 433: Isolation & Quarantine for Rural Communities (AM)
- PER 308: Rural Isolation & Quarantine for Public Health and Healthcare Professionals (PM)

**Please use the links below to register for both courses MGT 433 and PER 308. You will need**

**to click on both links to register for each course separately.**

<https://www.ruraltraining.org/training/schedule/2015-03-11-mgt433-dillon-mt-001/>

&

<https://www.ruraltraining.org/training/schedule/2015-03-11-per308-dillon-mt-001/>

Please sign-up no later than February 25, 2015 as a minimum of 20 registrations must be received by this date in order to confirm the class will be held. Should you have any questions regarding the facility or location please contact Sue Hansen at 406-683-3179 or [shansen@beaverheadcounty.org](mailto:shansen@beaverheadcounty.org).

### **Ebola CDC Online Resources:**

- [Updated Case Counts \(from WHO SitReps\)](#) - February 3, 2015
- [Q&A's about the Transport of Pediatric Patients \(< 18 years of age\) Under Investigation or with Confirmed Ebola](#) - February 2, 2015
- [Interim Recommendations for Influenza Vaccination and Post-exposure Chemoprophylaxis to Prevent Influenza Virus Infection in People Being Actively Monitored for Potential Ebola Virus Exposure](#) - February 5, 2015
- [Preventing Ebola by Screening Travelers\[ PDF - 1 page\]](#) - February 5, 2015

### OTHER RESOURCES

Influenza 2014-2015 Season (CDC): <http://www.cdc.gov/flu/about/season/>

Influenza (DPHHS): <http://dphhs.mt.gov/publichealth/cdepi/diseases/influenza.aspx>

Ebola: <http://www.cdc.gov/vhf/ebola/>

Norovirus: <http://dphhs.mt.gov/publichealth/cdepi/diseases/norovirus>

Pertussis: <http://www.dphhs.mt.gov/publichealth/cdepi/diseases/pertussis.aspx>

Mold: <http://dphhs.mt.gov/publichealth/cdepi/diseases/mold.aspx>

## **24/7 AVAILABILITY**

*The Communicable Disease Epidemiology (CDEpi) Program is available 24 hours a day, 7 days a week, 365 days a year, to assist local health jurisdictions. Local providers should call, including after normal business hours, their local health jurisdiction. The CDEpi 24-hour line is available as a back-up to the local health jurisdiction's 24-hour line. If you need CDEpi assistance, please call 406.444.0273. Phone calls to this number outside of normal business hours will be answered by the answering service. The answering service will immediately forward the message to CDEpi, and we will respond as quickly as possible.*

*Local health jurisdictions, please ensure that your local providers have your 24/7/365 contact information. And please inform CDEpi or the Public Health Emergency Preparedness Program of updates to your required 24/7 contact information.*

***This update is produced by the Montana Communicable Disease Epidemiology Program. Questions regarding its content should be directed to 406.444.0273 (24/7/365). For more information: <http://cdepi.hhs.mt.gov>***